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ABSTRACT

This report summarizes information on the status of health education in the Texas public schools. The first section addresses components of the public school health program. Section two considers the comprehensive school health program, intended to promote continued improvement of both school health and physical education. The third section covers the status of the Texas School Health Project (designed particularly to educate about cancer, but using a comprehensive health education approach). Accreditation monitoring reports is the topic of the fourth section. Texbooks and teacher resource books are addressed in the fifth section. Section six discusses Texas health objectives for 1990. The seventh section lists health education requirements for students at each of the grade levels, from kindergarten through grade 12. The final section describes certification requirements for teachers. (CB)

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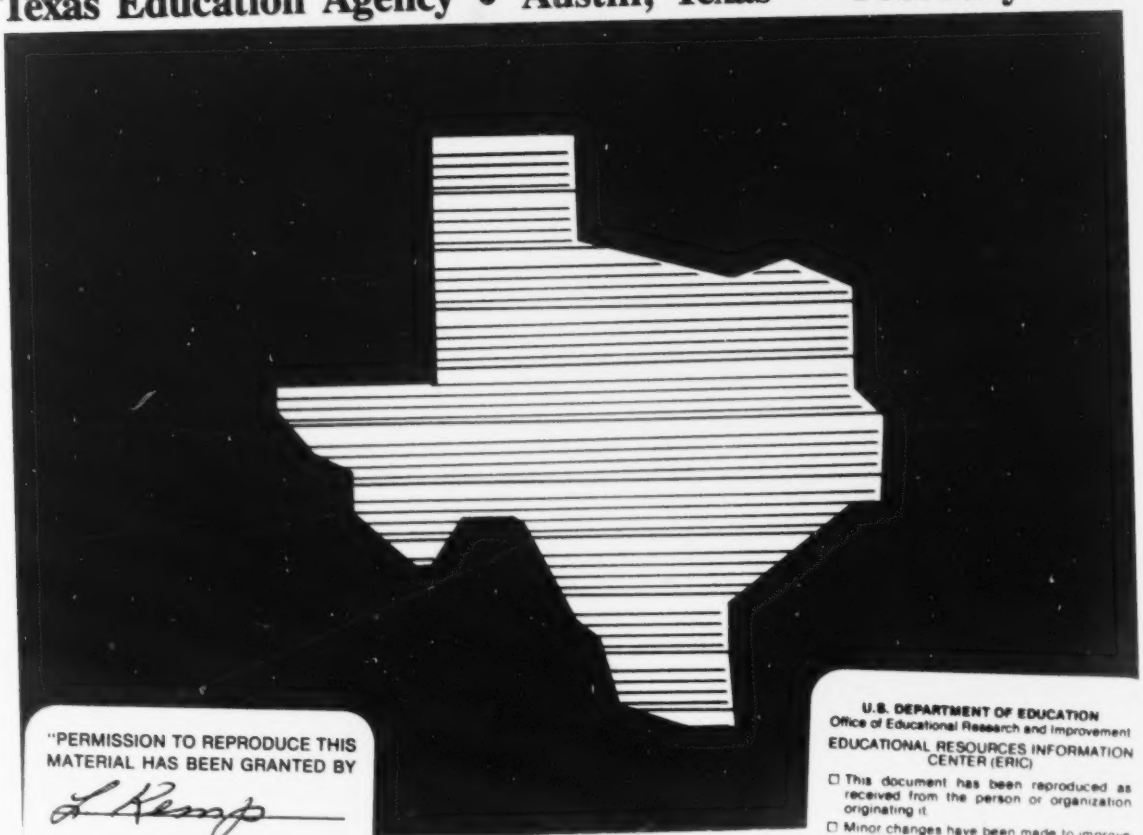
THE STATUS OF HEALTH EDUCATION

Curriculum Requirements for Students and Teachers

Texas Education Agency • Austin, Texas • February 1987



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SP028 774

State Board of Education Report on the Status of Health Education Curriculum Requirements for Students and Teachers

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February 1987

The Honorable William P. Clements, Jr., Governor of Texas
The Honorable William P. Hobby, Lieutenant Governor of Texas
The Honorable Gibson D. Lewis, Speaker of the House
Members of the 70th Legislature

House Concurrent Resolution 2 of the 69th Legislature directed the Texas Education Agency to assess the current health education curriculum requirements for both students and teachers. The Resolution specifically requested that information on cancer education be included in a report to the 70th Legislature. The report on the status of health programs in the public schools is comprised of nine categories of information:

- components of the public school health program
- organization of the comprehensive school health program in the Texas Education Agency
- status of the Texas School Health Program funded by the Texas Cancer Council
- accreditation monitoring reports for January 1986 through December 1986
- status of textbooks and teacher resource books for health education
- cooperation with the Statewide Health Coordinating Council in designing a state health plan
- cooperation with implementation of the Texas Health Objectives for 1990 under the leadership of the Texas Department of Health
- health education requirements for students
- certification requirements for teachers

Material presented here has been compiled by Texas Education Agency staff as requested in HCR2.

Respectfully submitted,

Jon Brumley

Jon Brumley, Chairman
State Board of Education

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Components of the Public School Health Program

Texas schools are providing programs that help students learn to protect their own health, including the prevention of cancer. In this effort, schools have three areas of responsibility: health education, health services, and health promotion. Because the primary responsibility of schools is instruction, health education is a major emphasis. Directly related to health instruction are health services, instituted in schools because health problems can interfere with successful school performance. Also related to health instruction is a healthy physical and social environment. The basis for the three components are the essential elements for health listed in Title 19, Chapter 75 of the Texas Administrative Code. All content to be taught, including information on cancer, is coordinated with the concepts and skills set forth in these essential elements.

The Comprehensive School Health Program

Supporting public school programs is the Comprehensive School Health Section of the Division of Curriculum Development, Texas Education Agency. The Division includes specialists in all nonvocational content areas that are offered in elementary and secondary schools. Health education is one of the content areas. Historically, health and physical education was recognized as a single content area in schools. For this reason, a section that combined the two content areas long existed at the Agency. However, in spite of the complementary nature of health and physical education, the concepts and skills taught and the teacher preparation necessary for the two disciplines are different. Therefore, in 1977 the State Board of Education recognized health and physical education as separate areas for teacher preparation. Their unique characteristics were confirmed when the 67th Legislature identified them as separate, mandatory areas of instruction in House Bill 246.

A 1986 organizational change at the Agency that established Comprehensive School Health as a separate section within the Division of Curriculum Development was intended to promote continued improvement of both school health and of physical education. The most striking benefit of the first year of separation is that educators are able to focus clearly on the goals of the two areas. Since a strong message of the State Board of Education is that all instructional areas relate to one another, the complementary nature of the two has not been sacrificed in their separation. The new Comprehensive School Health Section is fostering the concept of a coordinated approach among the health education, health services, and health promotion components in the schools.

Status of the Texas School Health Project

In Summer 1986, members of the Texas Cancer Council, a unit of state government, expressed confidence in public education by funding the Texas School Health Project which will continue through August 1987. Although the Council's main objective is to prevent cancer, members of the Council have chosen to address this objective in part through comprehensive school health. Council members as well as Agency staff recognize that the concepts and skills needed to prevent, detect, and treat cancer are common to many health problems and are part of the essential elements for health. Therefore, the Council's Texas School Health Project fits perfectly within the concept of comprehensive school health and shows great promise for fully achieving its objectives.

Fifteen of the 20 regional education service centers are participating in the Project. Each has designated a regional school health specialist to determine the needs of the schools in the region, to identify community resources, and to provide inservice training and technical assistance to schools.

The school health specialists are implementing a plan to achieve objectives related to: (1) advocacy, (2) planning, (3) plan development, (4) implementation of the plan, and (5) evaluation. Examples of major milestones in achieving these objectives are:

- A network consisting of 28 health organizations that relate to school health programs has been established and is used by the school health specialists.
- Representatives of all the regional education service centers are invited to attend meetings of the state coordinator and the regional school health specialists. In anticipation of expansion of the program to serve the entire state, all education service centers receive the information provided by the state coordinator.
- An assessment conducted during Summer 1986 indicated that school nurses and health educators were eager to take an active role in reducing the risk and incidence of cancer and promoting healthy lifestyles in their schools. The major areas of concern among educators were alcohol and drug abuse, school-age pregnancy and sex education, child abuse, cardiopulmonary resuscitation (CPR) and first aid, and cancer risks associated with tobacco.
- Regional plans have been made by each of the regional school health specialists.
- Workshops for teachers, school nurses, administrators, coaches, school board members, and school food service personnel have been conducted in the participating regions.
- A systematic approach to program evaluation has been developed and is being implemented. The first compilation of the evaluation reports will be made in June 1987.

A state coordinator funded by the Cancer Council is officed in the Comprehensive School Health Section at the Agency. The coordinator is implementing a plan to achieve objectives related to: (1) networking, (2) leadership, (3) monitoring, and (4) evaluation. Examples of major milestones in achieving these objectives are:

- Two conferences for regional specialists were conducted in 1986, and a third conference is planned for Spring 1987.
- The state coordinator is making presentations at several conferences to make educators and staff of community health agencies aware of the opportunity for coordination with the Project.
- The state coordinator has made a monitoring visit to each of the participating regional programs.
- A status report was prepared by the state coordinator in December 1986.

When the Project was begun in July 1986, 13 education service centers were initially identified to participate. Opportunities for expanding funds to include all regional education service centers have continued to be explored. The Cancer Council approved a plan to expand the Project to two more service centers from December 1986 through August 1987.

Accreditation Monitoring Reports

During 1986, most schools monitored by the Agency were successfully implementing the rules of the State Board of Education related to school health programs. In evaluating the quality of health programs, both specific and general criteria are used. Specific criteria relate to state laws and Board rules. General criteria relate to effective education practices. No criteria that relate specifically to information about cancer are included; however, teachers and nurses in schools that conduct adequate health services and health education programs, that use state-adopted books, and that have access to regional school health specialists are in an excellent position to teach students about cancer.

A total of 249 school districts were visited during 1986. Three districts received commendations concerning the quality of student health services. Six districts received recommendations for improvement concerning the quality of student health services. Thirty-two districts were cited for corrective action related to health services, and three districts were cited for corrective action related to health education. The accreditation monitoring reports for the remaining 205 districts did not include specific items related to school health. However, health education programs in some of the remaining districts may have had deficiencies regarding curriculum development, instruction, or teacher inservice training. These deficiencies were considered part of more encompassing problems that affected entire school programs. All school districts that have been cited for serious deficiencies must begin at once to address their most pressing problems. They will be monitored on a periodic basis by Agency staff. If the quality of school health programs in these schools does not improve commensurate with the progress of improvement in the overall programs, Agency school health specialists will provide specific technical assistance to the districts.

Textbooks and Teacher Resource Books

Statewide, health education is facilitated by state-adopted instructional materials provided at every grade level in elementary school and for each secondary health course. For example, new teacher resource books for health, Grades 1-3, and textbooks for Grades 9-12 were adopted by the State Board of Education in November 1986 and will be used in schools beginning in Fall 1987. Content specifications for these books included information about cancer. Specifications centered on the essential elements for the grades and courses in which the books will be used.

For Grades 1-3, the content specifications included reference to many routine health practices that promote good general health, for example, making food choices and avoiding the use of tobacco. No specific references were made to cancer; however, the health habits fostered are the same as those of instructional programs developed by groups such as the American Cancer Society.

Content specifications for the Grades 9-12 textbooks included a specific reference to the two diseases that account for the greatest morbidity in the United States: cancer and cardiovascular disease. One or more chapters specifically devoted to smoking and other uses of tobacco were required to be included in the high school texts.

The current call for textbooks, Proclamation 63, includes supplementary learning systems for prekindergarten and kindergarten which will be used beginning in Fall 1988. Specifications center on the essential elements for prekindergarten and kindergarten across several content and topical areas. The specifications that relate to health make reference to routine health practices that promote good general health.

Textbook Proclamation 65, to be issued by the State Board of Education in March 1988, will include a call for health textbooks for Grades 4-8. Content specifications are not yet written, but they will be consistent with the essential elements for health. The Proclamation will be drafted in 1987 and issued in 1988. Texts are scheduled for adoption in November 1989 and will be available for use in the schools in 1990.

In 1986, staff of the Texas Education Agency participated in a health planning process conducted by the Statewide Health Coordinating Council. Early drafts of the Texas State Health Plan for 1987 included categorical efforts toward the control of health problems such as cancer and drug abuse. However, the Council responded positively to recommendations of the Commissioner of Education to address concepts and skills common to the control of many health problems. This change provides a basis for activities in schools that show promise for reducing the risks of cancer and other diseases. In the Plan for 1987, the Statewide Health Coordinating Council confirmed the importance of the agreement between the Texas Cancer Council and the Texas Education Agency and recommended continued funding.

Texas Health Objectives for 1990

In 1984, Texas responded to a challenge of the U.S. Secretary for Health and Human Services to implement a plan for achieving national health promotion objectives for 1990. Staff of the Texas Education Agency participated in the process of identifying specific objectives that are of greatest concern in Texas. This list was compared to the essential elements for health, and more than one-third of the objectives related specifically to the essential elements.

The Texas Health Objectives for 1990 support emphasis of concepts and skills common to many health topics, including cancer. Staff of the Texas Department of Health agreed with the recommendations of Texas Education Agency staff to examine the objectives in terms of commonalities. This examination resulted in commitment to a coordinated approach to school health initiatives that relate to the Objectives. The coordinated approach enables the Agency and the Texas Department of Health to provide the most current health information to the school health specialists in regional education service centers participating in the Cancer Council's Texas School Health Project.

Health Education Requirements for Students

Daily and weekly schedules of instructional time in schools are based on requirements of the State Board of Education. Minimum time requirements for each content area may be exceeded but not at the expense of minimum requirements for other content areas.

Kindergarten-Grade 3
The weekly schedule includes health. There is no time requirement. However, a written plan for teaching the essential elements must be implemented.

Grades 4-6 (Elementary Campuses)
Six hours of instruction per six week grading period is required.

Grade 6 (Middle School Campuses)
There is no time requirement. However, a written plan for teaching the essential elements must be implemented.

Grades 7-9
Specific essential elements for health are taught during one three-week unit each semester of the life science course.

Grades 9-12
A one-semester course in health education is required.

State Board rules also include specific encouragement to districts to offer a one-semester course in health education at Grade 7 or 8. One important variation of this provision allows school districts to meet the requirements that are usually met through the life science course by having a required course in health education at Grade 7 or 8. The course must address specific essential elements. In addition to the required instruction, students may enroll in a one-semester elective course in health education at Grade 7 or 8 and in a one-semester elective course in Grades 9, 10, 11, or 12.

Teachers are encouraged to coordinate health instruction, particularly in the elementary grades, with related instruction in other content areas. This approach enables students to apply concepts and skills introduced

in other content areas to the study of health. For example, concepts and skills introduced in the study of science provide a factual foundation for the study of ways to prevent, detect, and treat cancer.

Certification Requirements for Teachers

In 1984, the State Board of Education approved revised rules for teacher preparation programs in Texas colleges and universities. The new rules ensure that prospective teachers receive adequate preparation to teach the essential elements.

Current certification requirements for educators who teach health education have been in effect since 1978 but are currently being examined and will be revised, if necessary, to be consistent with the essential elements for health. The certification requirements for health in kindergarten-Grade 6 are the same as the requirements for all elementary teachers. Educators who wish to specialize in elementary health education may enroll in 18 to 24 additional hours of specialized courses.

The certification requirements for teaching health in Grades 7-12 are specific. They are:

- Twenty-four semester hours of health or courses from related departments such as Biology, Nutrition, Home Economics, Health and Physical Education, or Education. Of the 24 hours, 18 hours must be advanced.
- A minimum of 15 semester hours that address all the following topics: consumer health; sex education for family living; nutrition; human diseases; use and abuse of tobacco, alcohol, and drugs; and human anatomy and physiology.

All candidates who complete teacher preparation programs are required to satisfactorily complete the Examination for Certification of Educators in Texas (EXCET).

Teachers who are working toward appropriate certification may be assigned to teach health on a temporary basis if the district has obtained approval. This rule is applicable to assignment of teachers in all content areas.

Registered nurses, because of their educational background and training, are recognized as informal health educators in schools. These school nurses are encouraged to serve as resources to teachers and to serve as guest speakers on health-related topics.

Finally, schools are required to offer a continuous program of inservice training related to the essential elements. In addition, teachers may participate in coursework or concentrated training that is applicable to progress on the career ladder. The regional school health specialists have been instrumental in increasing the number of health inservice programs and in providing instructional resources from public and private sources.

COMPLIANCE STATEMENT

TITLE VI, CIVIL RIGHTS ACT OF 1964; THE MODIFIED COURT ORDER, CIVIL ACTION 5281, FEDERAL DISTRICT COURT, EASTERN DISTRICT OF TEXAS, TYLER DIVISION

Reviews of local education agencies pertaining to compliance with Title VI Civil Rights Act of 1964 and with specific requirements of the Modified Court Order, Civil Action No. 5281, Federal District Court, Eastern District of Texas, Tyler Division are conducted periodically by staff representatives of the Texas Education Agency. These reviews cover at least the following policies and practices:

(1) acceptance policies on student transfers from other school districts;

(2) operation of school bus routes or runs on a non-segregated basis;

(3) nondiscrimination in extracurricular activities and the use of school facilities;

(4) nondiscriminatory practices in the hiring, assigning, promoting, paying, demoting, reassigning, or dismissing of faculty and staff members who work with children;

(5) enrollment and assignment of students without discrimination on the basis of race, color, or national origin;

(6) nondiscriminatory practices relating to the use of a student's first language; and

(7) evidence of published procedures for hearing complaints and grievances.

In addition to conducting reviews, the Texas Education Agency staff representatives check complaints of discrimination made by a citizen or citizens residing in a school district where it is alleged discriminatory practices have occurred or are occurring.

Where a violation of Title VI of the Civil Rights Act is found, the findings are reported to the Office for Civil Rights, Department of Health, Education and Welfare.

If there is a direct violation of the Court Order in Civil Action No. 5281 that cannot be cleared through negotiation, the sanctions required by the Court Order are applied.

TITLE VII, CIVIL RIGHTS ACT OF 1964; EXECUTIVE ORDERS 11246 AND 11375; TITLE IX, 1973 EDUCATION AMENDMENTS; REHABILITATION ACT OF 1973 AS AMENDED; 1974 AMENDMENTS TO THE WAGE-HOUR LAW EXPANDING THE AGE DISCRIMINATION IN EMPLOYMENT ACT OF 1967; AND VIETNAM ERA VETERANS READJUSTMENT ASSISTANCE ACT OF 1972 AS AMENDED IN 1974.

It is the policy of the Texas Education Agency to comply fully with the nondiscrimination provisions of all federal and state laws and regulations by assuring that no person shall be excluded from consideration for recruitment, selection, appointment, training, promotion, retention, or any other personnel action, or be denied any benefits or participation in any programs or activities which it operates on the grounds of race, religion, color, national origin, sex, handicap, age, or veteran status (except where age, sex, or handicap constitute a bona fide occupational qualification necessary to proper and efficient administration). The Texas Education Agency makes positive efforts to employ and advance in employment all protected groups.

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